FOR INSTRUCTIONS, SEE BACK OF FORM	FO	RM	
LITTE	DI	R-2	DISCLOSURE
DISCLOSURE SUMMARY PAGE	(Re	v. 01/98)	REPORT
IA ETHI	CS AND FOR O	ffice Use O	11 0121
COMMITTEE NAME (Must be same as on Statement of Organization)	DECISINATION OF THE PROPERTY O		
Mills County Elemocrates 2010 JAN 27	AM O L.	ed	
IMPORTANT: Indicate type of committee you are reporting for:	Comp	uter	
(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee	7		
(8) Support Slate of Candidates	1 1 2	,	21
SIGNATURE OF TREASURER (or person filing this report) TELEPHONE	065	DATES	14-10
SIGNATURE OF TREASURER (OF PERSON HIRING BIRS TOPOT)		DATES	Tone D
Routine Penalties Due For Late Filed Reports Range	from \$20 to	\$800	
SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE	<u>:E:</u>		
I AM FILING A Jan 1, 2009 - Dew 31, 2009 REPORT FOR ANA (1) EL	ECTION //2\N	ON EL ECT	ION VEAD
(report date)	ndicate one	3	ION YEAH.
CHECK IF AMENDMENT TO REPORT DATED	Local Committe	ees, enter D	ate of Election
☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.	County & Loca	L Committee	s, enter County in
(You must continue to file reports until a Notice of Dissolution is filed.)	which Election		
STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.)	e	35	2.25
ADD TOTAL MONEY TAKEN IN THIS PERIOD			100
Schedule A: Cash Contributions total (Attach Schedule A)		5	0.00
Schedule F: Loans Received total (Attach Schedule F)			
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	<u> </u>		
(Schedule H applies to Candidates' Committees Only)	on acct	,	.68
	ΓAL\$	براز	2 02
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		-70	8,13
Schedule B: Expenditures total (Attach Schedule B)		5	0.00
Schedule F: Loan Repayments total (Attach Schedule F)			
			0.0
CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)	\$	3	52, 43
UNPAID BILLS (From Schedule D - Attach Schedule D)	\$		0
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)			0
OUTSTANDING LOANS (From Schedule F - Attach Schedule F)			0
CANDIDATE COMMITTEES ONLY:			
CONSULTANT BREAKDOWN (Schedule G Attached?)			
		YE	S <u>v</u> NO

For Instructions, See Back of Form

SCHEDULE Α MONETARY **CONTRIBUTIONS -- MONEY TAKEN IN** (Rev. 02/96) **RECEIPTS** (Including candidate's personal funds) ☐ CHECK THIS BOX IF COMMITTEE NAME (Must be same as on Statement of Organization) AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED
05/14/2009	ID#	Harola Swanson		\$ 40
1 16009	CK#	Henwood, La		3000
	ID#	, 22, 22		
	CK#	Interest		. 68
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
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	ID#			
	CK#			
	ID#			
	CK#			
······································			SUB-TOTAL	\$
		TOTAL (if last pag	e of this schedule)	6 60

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

(for Schedule A)

	D	INICTO	CTIONS	SEE BACK	OF FORM
ru	κ	און פעוו	JUHUNS.	SEE BAUK	OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA

SCHEDULE B (Rev. 08/96)	MONETARY EXPENDITURES
☐ CHEC	CK THIS BOX IF

AMENDING FORM

ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTE	E NAME (Must be s	same as on Statement of Organization)			
Mi	Els Cor	inty Domocrates	ر		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	MAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	CATEGORY* (SEE BELOW)	AMOUNT EXPENDED
01/08/2009	ID# CK# /218	Malvein 2251551	Fair Booth	2	\$ 2500
-	ID# CK# /218	Mills Co. Jaw Board	Bar Be Gre	2	25
	/ み10 ID# CK#	Malvein, Da 51551		3	00
	ID#				
	CK# ID#				
	CK#				
	CK#		·		
	ID#				
La companya da la co					\$ 5500
				!	~Je)

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

*Campaign funds may be used only for:

(1) campaign purposes,

(2) constituency expenses, and

(3) educational and other expenses associated with duties of office.

Please insert the applicable number in the category column for each expenditure.

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 56.6(3)(i).)

Page		of		<i>'</i>	
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